

**SAMPLE CANCELLATION MEMORANDUM FOR NON-NNSA ELEMENTS**

MEMORANDUM FOR: INGRID KOLB

DIRECTOR, OFFICE OF MANAGEMENT

THRU:

KEVIN T. HAGERTY

DIRECTOR, OFFICE OF INFORMATION RESOURCES

FROM:

XXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXX

SUBJECT:

Request to Cancel (*identify directive number and title*)

BACKGROUND:

(*Provide background information for the basis of the cancellation. Justify why it is necessary to cancel the directive. If applicable, state what supersedes the canceled directive.*)

IMPACT:

(*State, if any, organizational impact on the cancellation of the directive. State if any cost savings or requirements will be remedied.*)

CONTACT:

(*Please provide name and telephone number of the point of contact.*)

DECISION:

Concur:

\_\_\_\_\_

Nonconcur:

\_\_\_\_\_

Date:

\_\_\_\_\_